

JULY 2018

KMAP GENERAL BULLETIN 18156**PA Updates**

Effective with dates of service on and after June 15, 2018, the following medications no longer require prior authorization (PA):

- Buprenorphine/naloxone (Suboxone[®] SL, Suboxone[®] SL film, Bunavail[™] buccal film, Zubsolv[®] SL)

Note: The effective date of the policy is June 15, 2018. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The **KanCare Open Claims Resolution Log** on the KMAP [Bulletins](#) page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

KMAP[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

DXC Technology is the fiscal agent of KMAP.